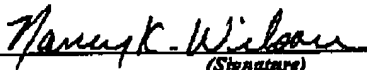


Sep 16 2005 9:46AM CANTOR COLBURN LLP

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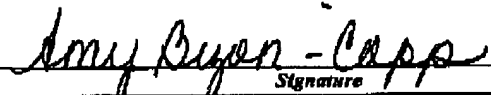
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SEP 16 2005

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. GRP-0011
Applicant(s): Kim Rishoj Pedersen et al.			
Application No. 10/049,415	Filing Date July 22, 2002	Examiner Laura A. Grier	Group Art Unit 2644
Invention: SIGNAL PROCESSING UNIT			
<p>I hereby certify that this <u>Amendment Transmittal Letter (1 pg); Amendment (11 pgs)</u> <small>(Identify type of correspondence)</small></p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>1-571-273-8300</u>)</p> <p>on <u>September 16, 2005</u> <small>(Date)</small></p> <div style="text-align: right; margin-top: 100px;"> <u>Nancy K. Wilson</u> <small>(Typed or Printed Name of Person Signing Certificate)</small>  <small>(Signature)</small> </div>			
<p>Note: Each paper must have its own certificate of mailing.</p>			

P16/REV02

SEP 16 2005

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No.	
Applicant(s): Kim Rishoj Pedersen et al.				GRP-0011	
Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.
10/049,415	July 22, 2002	Laura A. Grier	23413	2644	1155
Invention: SIGNAL PROCESSING UNIT					
COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	11 -	20 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	6 -	7 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ In the amount of _____					
<input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 06-1130					
<input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.					
<input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038.					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 Signature			Dated: September 16, 2005		
Amy Bizon-Copp Registration No. 53,993			<div style="border: 1px solid black; padding: 5px;"><p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____</p><p>(Date)</p><p>_____ Signature of Person Mailing Correspondence</p><p>_____ Typed or Printed Name of Person Mailing Correspondence</p></div>		
CC:					

P11LARGE/REV09

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: KIM RISHOJ PEDERSEN et al.)
Serial No. 10/049,415) Group Art Unit: 2644
Filed: July 22, 2002) Examiner: Laura A Grier
For: SIGNAL PROCESSING UNIT)

**REPLY TO NON-FINAL OFFICE ACTION
UNDER 37 C.F.R. §1.111, WITH AMENDMENT**

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office action mailed June 16, 2005, Applicants request reconsideration in view of the following remarks for entry in the above-identified application.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper; and

Remarks begin on page 5 of this paper.

I hereby certify that this correspondence, consisting of 11 total pages, was facsimile transmitted to the United States Patent Office (Fax No. 1-571-273-8300) on	
September 16, 2005	
(Date of Deposit)	
Nancy K. Wilson	
(Name of Person Faxing Paper)	
Nancy K. Wilson	9/16/05
Signature	Date